on the state of th								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOF								10 653749					
CLAIMS AS FILED - PART I									ENTITY				
			(Column	1)	(Column 2)			TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			0					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			9 minus 20=		• 0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		9			X42=		OR	X84=		
Mi	JLTIPLE DEPEN	NDENT CLAIM P	RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter *0" in column 2						column 2	ı	TOTAL		OR	TOTAL	750	
CLAIMS AS AMENDED - PART II										٤	OTHER		
_	(Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 6	Minus	2	U_	= -		X\$ 9=		OR	X\$18=	-	
	Independent	* /	Minus	ر		1 -		X42=	_	OR	X84=	)	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						I	+140=		ОЯ	+280=		
	1-65						L	TOTA			TOTAL		
0	12310	(Column 1)	(Column 2) (Column 3)					OOIT. FE	£ <u></u>	J • · ·	ADDIT. FEE	-	
AMENDMENT B		CLAIMS	RIGHEST				Пг		ADDI-	1		ADDI-	
		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 6	Minus	* 2	Ø		I	X\$ 9=		OR	X\$18=		
	Independent	* /	Minus	ENDENT	Z 4114	= /		X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /						ſ	+140=		OR	+280=		
							L	TOTA		OR	TOTAL		
(Column 1) (Column 2) (Column 3)								DO(1. 1 C)			AUDII, FEE		
၁		CLAIMS REMAINING		RIGHE	EST BER JUSLY		ſ	RATE	ADDI-			ADDI-	
AMENDMENT C		AFTER AMENDMENT		PREVIO		PRESENT EXTRA			TIONAL		RATE	TIONAL FEE	
	Total	•	Minus	•		•		X\$ 9=		OR	X\$18=	, , , ,	
	Independent	•	Minus	444		=		X42=		00	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-	OR	7.075		
. ,	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***Total ADDIT. FEE  ***Total Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL		
	The "Highest Nurr	mber Previously Pai ober Previously Pai	d For (Total or	tndepende	nt) is the	in 3, enter "3." highest number	four	nd in the a	ppropriate bo				